Department of Children & Youth

Center Complaint Inspection Summary Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details		
Program Name Kiddie Academy Educational Child Care	Program Number 2230028709	Program Type Child Care Center
Address 4248 Buckeye Parkway Grove City OH 43123		County FRANKLIN

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) BEVERLY JAMES	Inspection Day 02/04/2025	Begin Time 12:30 PM	End Time 5:00 PM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
9	5	0	2	4

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Infant	0 to < 12 months	2 to 6	
Older Infant	12 months to < 18 months	1 to 6	nap
Young Toddler	18 months to < 30 months	1 to 10	nap
Older Toddler	30 months to < 36 months	1 to 7	Nap
Preschool	Mixed Age Group	2 to 16	PS/PreK/SA combined at nap.

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Complaint Allegations

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Child Guidance
Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: The program staff does not use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Determination: Substantiated

Findings: During the inspection, it was determined that a child care staff member used a discipline technique to guide or discipline child(ren) that was not developmentally appropriate, consistent, or occurred at the time of the incident. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule. (Infant CCSM hits infants' mouth with fingers in a manner that could hurt or scare child.)

Risk Level: Low

Corrective Action Plan Due: 03/08/2025

Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Supervision
Code: The program staff is required to protect or remove a child from a situation and/or person that are determined to be unsafe or inappropriate.

Allegation: The program staff does not meet each child's basic, developmental, behavioral and special needs.

Determination: Substantiated

Findings: During the inspection, it was determined the administrator, child care staff, and/or employees of the program did not protect or remove children from a situation and/or person determined to be unsafe or inappropriate as noted in number(s) 5 below:

1. Verbal argument involving adults.
2. Staff member(s) allowed child(ren) to do something unsafe.
3. Staff member(s) did something unsafe.
4. Children were exposed to inappropriate [language; conversation; behavior; video; music; DVD] by a [staff member/child/parent].
5. Other (Infant CCSM along with other CCMS's were using cellphones, mobile watches, ear buds, tablets and laptops while supervising children.)

While the program did not protect the child(ren) from an unsafe or inappropriate situation and/or person, it was determined the situation would not or did not result in a serious incident or injury to a child. All program employees must take actions to protect children in care. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

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Risk Level: Low

Corrective Action Plan Due: 03/08/2025

Domain:07 Diapering & Infant Care

Rule: 5180:2-12-23 Infant Bottle and Food Preparation
Code: The program staff is required to serve breast milk to the identified infant labeled on the bottle.

Allegation: The program staff does not serve formula to the identified infant labeled on the bottle.

Determination: Substantiated

Findings: During the inspection, it was determined that an infant was served another child's breast milk. The program must ensure there is a system in place to serve the correct breast milk to the correct infant. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule. (Infant CCSM gave an infant who drinks formula another infant's breastmilk.)

Risk Level: Moderate

Corrective Action Plan Due: 03/08/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain:07 Diapering & Infant Care

Rule: 5180:2-12-20 Cribs
Code: The program is required to place infants in cribs while sleeping.

Findings: During the inspection, it was determined that the equipment in number(s) 7 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

1. Mesh cribs;
2. Play pens;
3. Bassinets;
4. Cots;
5. Car seats;
6. Infant swing;
7. The floor; (Specialist viewed video on the day of inspection, a child sleeping on the floor as an Infant CCSM sat nearby on the floor. Another Infant CCSM walked over and picked infant up off the floor. Infant children not sleeping in cribs also corroborated by staff interviews.)
8. Infant seats;
9. An infant placed in a car seat in a crib;
10. Other [ ].

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/08/2025

Low Risk Non-Compliances

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting
Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in number(s) 2 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program. (Infant given breast milk instead of formula)
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/08/2025

Domain:05 Health & Safety

Department of Children & Youth

Rule: 5180:2-12-16 Incident/Injury Reporting
Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 “Incident/Injury Report” as noted in number(s) 4 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2.The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.
4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program. (Infant given breast milk instead of formula)
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child’s name was incomplete on the JFS 01299.
8. Child’s birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. Other [ ].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 03/08/2025